# Burmese TB Follow-Up Worksheet INSTRUCTIONS

## 1. Background

In June 2005, an interim pre-departure classification of tuberculosis (TB) conditions was implemented specifically for the Hmong and Burmese refugees arriving in the United States from Thailand who are undergoing enhanced overseas TB screening and treatment. These pre-departure classifications were noted on the new Pre-Departure TB Classification Coversheet included in the refugee medical packet. Because the new classification (Class B TB Other) did not appear on the yellow notification forms (CDC 75.17 and 75.18), state/local health departments should complete the attached form, "Burmese TB Follow-up Worksheet."

For the purpose of post arrival surveillance, CDC's Division of Global Migration and Quarantine (DGMQ) requests that the attached form be completed on Burmese refugees with any TB condition who have undergone the enhanced overseas TB screening and/or treatment in Thailand.

# 2. Worksheet Objectives

The Worksheet is designed to collect information on Burmese refugees from Thailand who have resettled to the US and who were classified with a TB condition overseas during the required medical examination process, and were recommended for follow-up evaluation in the US.

The definitions and completion instructions table identify the field number and name in the US-based TB Evaluation Worksheet.

#### 3. Field Definitions and Instructions

Obtain the Burmese follow-up worksheet from the 12/20/2006 posting on the Epi-X DGMQ Refugee Health Forum or at <a href="http://www.cdc.gov/ncidod/dq/refugee/index.htm">http://www.cdc.gov/ncidod/dq/refugee/index.htm</a>.

The following sections include a detailed overview of the worksheet with the name and definition of each field.

#### Section A: Demographic Information

A1: Name (Last, First, Middle) - Last, first and middle name of the refugee (R).

A2: Alien # - Alien number of the R.

A3: Visa Type – N/A (Not Applicable).

A4: Initial U.S. Entry Date - N/A

A5: Age - Age of the R.

A6: Gender – Sex of the R.

A7: DOB (Date of Birth)- Month, day and year the R was born.

**A8:** TB Class - TB class of the **R**, as determined by the overseas panel physician.

A9: Class Condition - N/A

A10: Country of Examination - N/A

A11: Country of Birth - N/A

A12: Port of Arrival - N/A

A13: Port Contact Name - N/A

A14: Port Contact Phone - N/A

A15a: Sponsor Name - N/A

A15b: Sponsor Phone - N/A

A15c: Sponsor Address - N/A

A16a: Sponsoring Agency Name - N/A

A16b: Sponsoring Agency Phone - N/A

A16c: Sponsoring Agency Address - N/A

#### Section B: Jurisdictional Information

**B1: Destination State: N/A** 

**B2: Jurisdiction:** N/A

**B3: Jurisdiction Phone Number:** N/A

#### Section C: U.S. Evaluation

This section is for data entry of the medical evaluation performed in the U.S.

**C1:** Date of Initial U.S. Medical Evaluation - Month, day and year when the medical evaluation for the **R** was initiated by a U.S. medical provider resulting in initial diagnostic tests or medical assessment.

C2a: TST Placed - Placement of tuberculin skin test (TST) in the U.S., reflecting:

- 'Yes'
- 'No'
- 'Unknown'

C2b: TST Placement Date - Month, day and year when TST was placed.

**C2c: TST mm** - Millimeters of induration for a TST provided in the U.S. (2 digits: 01 - 20 mm). If skin test result only indicates "positive" or "negative," enter as "99".

**C2d: TST Interpretation** - Indicate the result of the Mantoux (tuberculin, PPD, 5TU) test performed during the medical evaluation.\* Result of U.S. TST, reflecting:

- 'Positive' patient is likely infected with *M. tuberculosis*
- 'Negative' skin test did not meet current criteria for a positive test
- 'Unknown' means the results of the skin test are not known

**C2e: History of Previous Positive TST** - Indicate if there is a history of previous positive TST

**C3a:** Quantiferon® (QFT) Test – indicate if patient received a QFT test in the U.S. Results reflecting:

- 'Yes'
- 'No'
- 'Unknown'

C3b: QFT Collection Date - Indicate month, day and year when R had QFT test in the U.S.

**C3c: QFT Result** - Indicate the result of a QFT test performed during the medical evaluation. Results:

- 'Positive' the **R** is probably infected with *M. tuberculosis*.
- 'Negative' the test did not meet current criteria for a positive test.

- 'Indeterminate' the test result is not defined.
- 'Unknown' the test results are not known.

#### U.S. Review of Overseas CXR (C4 - C6)

**C4: Overseas CXR Available?** – Indicate if the **R** provided the overseas chest radiograph (CXR) to the U.S. medical provider for review?

- 'Yes' the **R** overseas CXR is available.
- 'No' the R overseas CXR is NOT available
- 'Not Verifiable' the **R** overseas CXR provided is suspected not to belong to the applicant (i.e., fraudulent or mistaken radiograph).

**C5: Interpretation of Overseas CXR** - U.S. interpretation of the overseas CXR reflecting:

- 'Normal'
- 'Abnormal'
- 'Poor quality' = the CXR is considered to be of substandard quality and cannot be interpreted.
- 'Unknown' = not known if U.S interpretation of the overseas CXR(s) was done, or the interpretation is not known.

**C6: Overseas CXR Abnormal Findings** – If a U.S. physician interprets the overseas CXR as 'abnormal,' indicate type of abnormality(s) reported. Check all that apply:

- Abnormal, not TB
- Cavity
- Fibrosis
- Infiltrate
- Granuloma(ta)
- Adenopathy
- Other (specify)

#### Domestic CXR (C7 - C10)

C7: U.S. CXR Done? - Indicate if CXR was done during U.S. medical evaluation.

**C8:** Date of U.S. CXR - Indicate month, day, and year when CXR was done during U.S. medical evaluation.

C9: Interpretation of U.S. CXR - Indicate the interpretation of the CXR taken in the U.S.:

- 'Normal'
- 'Abnormal'
- 'Unknown'

**C10: U.S. CXR Abnormal Findings** - Indicate the abnormality(s) found in the CXR. Check all that apply:

- Abnormal, not TB
- Cavity
- Fibrosis
- Infiltrate
- Granuloma(ta)
- Adenopathy
- Other (specify)

#### Comparison (C11)

**C11: U.S. CXR Comparison to Overseas CXR** - Indicate the comparison between the U.S interpretation of the overseas CXR and the CXR taken during the U.S. medical evaluation.

- 'Stable' findings are similar for overseas and U.S. CXR
- 'Worsening' findings indicate worsening of TB disease
- 'Improving' findings indicate improvement of TB disease
- 'Unknown' interpretation of CXR or comparison are unknown

# C12: U.S. Microscopy / Bacteriology (Check box: Sputa in U.S. Not Collected, if applicable)

- **Specimen #:** Numbers 1-3 are system generated to allow the recording of results for three sputum specimens collected during this medical evaluation.
- **Specimen Source:** Sputum includes spontaneous and induced sputum. Sputum or pulmonary secretions obtained by bronchoscopy procedures or gastric aspiration should also be included. Do NOT include tracheal suction.
- Date: Indicate month, day and year each specimen was collected.

#### AFB Smear Result:

- 'Not Done'
- 'Positive' positive for Acid-Fast Bacilli
- 'Negative' negative for Acid Fast Bacilli.
- 'Unknown' it is NOT known if a sputum smear was performed, or the results are NOT known for a reason other than pending results (e.g., result was lost or no other specimens can be obtained).

#### • Culture Result

- 'Not Done' sputum culture test for acid-fast bacillus is known not to have been done.
- 'NTM' culture results are positive for growth of Non-Tuberculosis Mycobacterium

- 'Negative' results were negative for growth of mycobacterium
- 'Contaminated' sputum culture test for acid-fast bacillus is known to have been contaminated.
- 'MTB Complex' culture results are positive for growth of Mycobacterium tuberculosis complex (M. tuberculosis, M. bovis, M. africanum)
- 'Unknown' it is NOT known if sputum culture test for acid-fast bacillus was performed, or the results are NOT known for a reason other than pending results (e.g., result was lost or specimen contaminated, and no other specimens can be obtained).
- **Drug Resistance** (**DR**): Sensitivity testing should include at least Isoniazid and Rifampin.
  - 'Not done' drug susceptibility testing was not performed
  - 'No DR' means pansusceptible
  - 'Mono-INH' means any specimen cultures resistant only to Isoniazid (regardless of concentration level of resistance). Specimen cultures resistant to Isonizaid and another drug (except Rifampin) would be noted under 'Other Resistance'
  - 'Mono-RIF' any specimen cultures resistant only to Rifampin. Specimen cultures resistant to Rifampin and another drug (except Isoniazid) would be noted under 'Other Resistance'
  - 'MDR-TB' any specimen cultures resistant to at least Isoniazid and Rifampin
  - → 'Other DR' means resistance to drugs or drug combinations not listed above. Please record the resistance pattern in Section F: Comments

#### U.S. Review of Overseas Treatment (C13 - C17)

#### C13: Overseas Treatment Recommended by Panel Physician

- 'Yes' treatment recommendation is documented on the DS forms/medical packet
- 'No' treatment recommendation is NOT documented on the DS forms/medical packet
- 'Unknown' it is NOT known if this information is documented

**C14: Overseas Treatment Initiated\*** - Indicate if the **R** started treatment for TB disease as determined during the U.S. medical evaluation through information obtained from the overseas medical forms and overseas panel physician documentation.

- 'Yes' the **R** started TB treatment overseas.
  - Patient-Reported: patient reports that treatment was started
  - Panel Physician-Documented: treatment is documented on the DS forms/medical packet
  - > Both
- 'No' the R did not start TB treatment overseas.
- 'Unknown' it is NOT known if the **R** started TB treatment overseas.

\* Note: If the **R** was started on treatment for TB infection please record this information in **Section F: Comments** 

C15: Arrived on Treatment - Indicate if the R arrived to the U.S. on TB treatment.

- 'Yes' the **R** started TB treatment overseas and arrived with TB medications and currently on treatment.
- 'No' the **R** was not on treatment when arrived in US
- 'Unknown' it is NOT known if the R started TB treatment overseas.

**C16: Completed Treatment Overseas** - Indicate if the **R** completed treatment for TB disease as determined during the U.S. medical evaluation through information obtained from the overseas medical forms and overseas panel physician documentation.

- 'Yes' the **R** completed TB treatment overseas.
- 'No' the **R** did not complete TB treatment overseas.
- 'Unknown' it is NOT known the **R** completed TB treatment overseas.

**C17: Overseas Treatment Concerns** - Indicate if there are concerns with the overseas treatment effort. Check 'Yes' if the U.S. medical evaluation raises concerns about inadequate or inappropriate drug regimen, drug doses, or treatment length for overseas treatment.

- 'Yes' If Yes is selected, record concerns in **Section F: Comments**
- 'No'

#### Section D: Disposition

This section is for entry of information regarding the final diagnosis following the completion of the  $\bf R$  U.S. medical evaluation.

**D1: Disposition Date** - Indicate the month, day and year when the evaluation disposition was determined.

**D2: Evaluation Disposition** - Indicate the disposition of the evaluation reflecting:

- 'Completed evaluation' the evaluation has led to a final TB diagnosis
  - > Treatment Recommended
  - No treatment recommended
- Initiated Evaluation/Not Completed- the evaluation was initiated, but a final diagnosis could not be made due to:
  - 'Moved within U.S.' the R was located and evaluation was initiated, but the R moved to another jurisdiction before completing the evaluation. Initial jurisdiction can provide locating information for the new jurisdiction
  - ➢ 'Lost to Follow-up' the R was located and evaluation was initiated, but the R failed to return to complete the evaluation. Initial jurisdiction CANNOT provide locating information.

- ➤ 'Returned to Country of Origin' the **R** was located and evaluation was initiated, and it is known the **R** returned to their country of origin prior to completion of the evaluation
- 'Refused Evaluation' an evaluation was initiated by the R, but refused to complete
- 'Died' the R was located and evaluation was initiated, but R died prior to completing the U.S. evaluation.
- 'Other, specify' the R was located and evaluation was initiated, and evaluation disposition was not completed. Record the reason Not Completed, if other than above.
- Did Not Initiate Evaluation means an evaluation was NOT initiated
  - 'Not located'
  - 'Moved within U.S.' the R was located, an evaluation was NOT initiated because R moved to another jurisdiction before initiating the evaluation. Initial jurisdiction is able to provide locating information for the new jurisdiction
  - ➢ 'Lost to follow-up' the R was located, but an evaluation was NOT initiated.
    Initial jurisdiction CANNOT provide locating information.
  - 'Returned to country of origin' the R was located, but an evaluation was NOT initiated and it is known the R returned to their country of origin, prior to initiation of the evaluation.
  - 'Refused evaluation' the R was located, but an evaluation was NOT initiated because of the R refusal.
  - 'Died' the R was located, but an evaluation was NOT initiated due to death.
  - 'Unknown' the R was located. It is unknown why the evaluation was NOT initiated
  - 'Other, Specify' means the R was located, but an evaluation was NOT initiated due to other reasons. Include this in Section F: Comments.

**D3:** Diagnosis - Indicate the final TB diagnosis (ATS classification) for those with completed U.S. evaluation. Final TB diagnosis reflecting:

- 'Class 0 No TB Exposure, Not Infected': means no exposure
- 'Class 1 TB Exposure, No Evidence of Infection': means exposure but not latent TB infection
- 'Class 2 TB Infection, No Disease': means latent TB infection
- 'Class 3 TB, Active Disease': means active TB disease
- 'Class 4 TB, Inactive Disease': means old, healed, inactive TB disease

**D4: RVCT Reported** - Indicate whether your locality will be reporting this patient to the national TB surveillance system as a confirmed case.

**D5: RVCT** # - If you are reporting this patient, provide the RVCT number.

#### Section E: U.S. Treatment

This section is for entry of information regarding tuberculosis treatment provided to the  $\bf R$  in the U.S.

E1: U.S. Treatment Initiated - Indicate whether treatment has been initiated.

- 'No treatment' No TB treatment has been initiated
- 'Active disease' treatment for active TB disease has been initiated. Active disease includes both <u>pulmonary and extrapulmonary</u> tuberculosis. Use **Section F**:
   Comments to provide additional diagnostic and treatment information, and type of active disease.
- 'LTBI' treatment for Latent TB Infection has been initiated
- 'Unknown' TB treatment initiation is NOT known

**E2: U.S. Treatment Start Date** - Month, day and year for start of TB-related treatment in the U.S. for the **R**.

#### E3: U.S. Treatment Completed:

- 'Yes' the recommended course of TB treatment has been completed,
- 'No' the recommended course of TB treatment has NOT been completed.
- 'Unknown' information on treatment completion is NOT known

**E4: U.S. Treatment End Date** - Month, day and year for end of TB-related treatment in the U.S. for the **R**.

#### Section F: Comments

Enter comments as desired.

# 4. Returning Completed Forms

Please send the completed Burmese follow-up worksheets to:

Ms. Carla Robbins
Division of Global Migration and Quarantine, Mailstop E-03
1600 Clifton Road, NE
Atlanta, GA 30333

### 5. Questions

If you have any questions about this request, please contact Dr. Maria Cano at (404) 639-4460 or MCano@cdc.gov.